Notary Public Application Instructions

To Qualify for Appointment as a Notary Public You Must:

- Be at least 18 years of age, and
- Be able to read and write English, and
- Reside in Washington State *or* reside in an adjoining state and be regularly employed in Washington State or carry on business in Washington State.

Complete the Application

- If you are a first-time applicant, or if you are renewing your appointment *after* your expiration date, complete the application form in full. You must swear or affirm and sign the Declaration of Applicant **in front** of a notary public.
- If you are renewing your appointment *prior* to your expiration date, complete only the Applicant Information and Applicant Personal Data sections of the application form.
- Your name and your signature on the application form must be identical. We require your last name and at least your first and middle initials (RCW 42.44.050).
- Your Social Security Number is required (RCW 26.23.150).

Obtain a \$10,000 Surety Bond

- When you first apply and each time you renew your appointment, you must obtain a \$10,000 surety bond from any insurance company qualified to write surety bonds in this state.
- The surety bond must cover the four-year period of the notary public term.
- Your name on the surety bond should be identical to your name and your signature on the application form.

Submit the Application

• Send the completed application form, along with the \$10,000 surety bond (original or copy), and application or renewal fee of \$30 (make your check or money order payable to the Washington State Treasurer) to:

Department of Licensing Notary Public Section P. O. Box 9048 Olympia, WA 98507-9048

 Allow approximately thirty days for your application to be processed and your notary certificate to be printed and mailed to you.

Obtain Your Notary Seal or Stamp

- You must present a photocopy of your notary public certificate to the vendor you choose to make your stamp or seal before it can be provided to you.
- Upon completion of any notarial act, the notary must sign the notary certification using his or her name exactly as it appears on the notary public certificate and on the seal or stamp.

The Laws Relating to Notaries Public

- Visit the Notary Public web site at: www.dol.wa.gov to see all the laws relating to Notaries Public. Find the "Quick Clicks" menu at the right side of the screen and click on RCW 42.44, WAC 308-30, and Uniform Regulation of Business and Professions.
- As a Notary Public in Washington State, you are expected to know and abide by all of the notary public laws.

Change of Address

If your address changes, please notify us via e-mail at intnotarie@dol.wa.gov, or by mail at Department of Licensing, Notary Public Section, PO Box 9027, Olympia, WA 98507-9027. Include your name as shown on your notary certificate along with your date of birth, and your previous and new addresses.

Questions?

Call us at (360) 664-1550.



NOTARY PUBLIC SECTION P.O. BOX 9048 OLYMPIA, WA 98507-9048 (360) 664-1550 dol.wa.gov

Notary Public Appointment Or Reappointment Application

FOR VALIDATION ONLY
001-000-256-0001

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FEE: \$30.00 A \$10,000 surety bond must be provided. Enclose the original or a copy.

Make remittance payable to State Treasurer.
Send application and bond with your remittance to:
Department of Licensing
PO Box 9048
Olympia, WA 98507-9048

Please type or print clearly in dark ink

Applicant Information	☐ Original Appointment	☐ Reappointment		
Applicant Name				
Applicant Name	MIDDLE NAME OR INITIAL LAST NAME			
Address	PO BOX/STREET			
City	_ State Zip Code	County		
Telephone No. ()	_ ☐ WA Resident ☐ Non-reside	nt, State		
Date of Birth/ Gender				
Name on any previous Washington Notary appoir	ntment, if different from above:			
Endorser Signatures – provide three	ee (3) endorsements			
I, the undersigned endorser, being a person eligible to vote in the state of Washington, and of the age of 18 or more, believe the applicant for a notary public appointment, who is not related to me, to be a person of integrity and good moral character and capable of performing notarial acts.				
1ENDORSER'S SIGNATURE	ADDRESS, CITY, STATE, ZIP	DATE OF SIGNING		
2. ENDORSER'S SIGNATURE	ADDRESS, CITY, STATE, ZIP	DATE OF SIGNING		
3	ADDRESS, CITY, STATE, ZIP	DATE OF SIGNING		
Applicant Personal Data				
1. Have you been convicted of a crime, misdemeanor or felony in this state, any other state, by the federal government, or any other jurisdiction within the past ten years, other than a traffic infraction?				
2. Is there a criminal complaint, accusation, or information presently pending against you or are you currently under indictment in this state, any other state, by the federal government, or any other jurisdiction?				
3. Has any professional or occupational license, certification, or permit held by you, been fined, suspended, revoked, refused or denied in this state, any other state, by the federal government or any other jurisdiction?				
4. Have you ever had a civil court order, verdict, or judgment entered against you in any court of competent jurisdiction in this state, any other state, by the federal government, or any other jurisdiction?				
Please explain on the next page or attach a letter of explanation for any "Yes" answers to the questions above, including charge(s), date of conviction, civil judgement or order, county				

jurisdiction, state, and disposition of charge(s).

Explanation for Any Personal Data "Yes" Answer(s)			
Attach a separate sheet if more space is needed.			
Declaration of Applicant - Must b	e sworn to or affirmed and signe	d in front of a notary publi	
,PRINT NAME EXACTLY AS IN "APPLICANT INF	, solemnly	swear or affirm under penalty of	
carefully read the materials provided describin that I will perform to the best of my ability, all not in the foregoing application and have answered penalty of perjury under the law of the state of true and correct. Should I furnish any false info cause for the denial, suspension or revocation	otarial acts in accordance with the law. I he them completely, and pursuant to RCW Washington that my answers and all statement in this application, I hereby agree	have carefully read the question / 9A.72.085, I declare under ements made by me herein are e that such act shall constitute	
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	SIGN EXACTLY AS IN "APPLICANT INFORMATION" S	SECTION DATE	
	CITY	STATE	
Signed and sworn to before me on this	day of		
Signed and sworn to before the on this	day of	,,	
	COUNTY AND STATE		
	SIGNATURE OF NOTARY PUBLIC		
SEAL			
	PRINTED NAME OF NOTARY PUBLIC		
	RESIDING AT		
	ALOIDING AT		
	EXPIRATION DATE OF NOTARY PUBLIC APPOINTMENT	NT	

Upon Filing, This Document Becomes a Public Record and is Subject to Public Disclosure Provisions Under RCW 42.56